

Sea Club of Indian Shores Condominium Association Inc,

19725 Gulf Blvd, #600 Indian Shores, Florida 33785 Fax 727 517-9441

E-mail: seaclub33785@gmail.com website: Seaclubcoa.com

Alteration or Replacement Policy

Date: _____ Unit _____

Owner

Name _____

E-Mail _____

Cell # _____

Approved Yes ___ No ___

By: _____

Date: _____

Alteration or Replacement to Unit

___ Front Door or Screen Door (bronze)

___ Windows (outside frame must be bronze)

___ Patio Door (bronze)

___ Patio Enclosure / Screening (bronze)

___ Hurricane Shutters bronze

___ Air Condition Unit / Crane

24Hr notice required for roof access plus required Insurance COI

The Sea Club Association policy to replace or modify any of the above items is as follows:

In order to preserve the aesthetics and to maintain a consistent standard of appearance in our community, all materials must be of good quality, type, style, and exterior color (bronze) as those that already exist in our complex. Work must be performed in accordance with applicable regulations, and in a safe and professional manner.

As the unit owner you are responsible for complying with all federal, state and local regulations, and permits that may be required to start your project.

Also, prior to the start of work, the **Association requires** that you obtain from your install company a copy of the company, and /or sub-contractor

- a. Florida license
- b. Proof of insurance COI
- c. Proof of worker's compensation COI

All documents must have valid dates that sync with the time the work is being performed. If your install company uses sub-contractors, the same documents will also be required from the sub-contractor. You or your contractor may send the forms to the association via email to **seaclub33785@gmail.com**. or by fax to 727 517-9441 or USPS. **24hrs notice + COI documents required for all roof access.**

Attach a drawing with details, and specification of materials, and color, or have your contractor submit a description of the scope of work, specification with color and the **expected start date**. You should forward a copy of this policy to your contractor. Return this completed form along with other require documents to the association at seaclub33785@gmail.com. Please submit all together at one time.

REMINDER: Owners that choose to have their balcony screened or add hurricane shutters to their unit may be required to remove the shutters, and or provide access during scheduled maintenance or repairs, Example: Painting of building etc. Also, if you change doors and or door locks, you **must provide the association with a key** for pest control entry. Including storm/screen doors. Shutters require additional specifications.

Estimated Start Date: _____ Contractor _____

Name of

Contractor - Contact Person _____ Phone # _____

Thank You

Sea Club Association Board of Directors

Form 2024 Sept